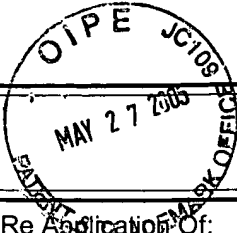


JPW



TRANSMITTAL LETTER
(General - Patent Pending)

Docket No.
EIS-5909C

In Re Application Of: Mihai et al.

Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/748,762	December 30, 2003	Unknown	29200	Unknown	2733

Title:

SYSTEM AND METHOD FOR MEDICAL DEVICE AUTHENTICATION

COMMISSIONER FOR PATENTS:

Transmitted herewith is:

Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address (1 page) (duplicate);
Statement Under 37 CFR 3.73(b) (1 page) (duplicate); and
Return Receipt Postcard

in the above identified application.

- ☒ No additional fee is required.
- ☐ A check in the amount of _____ is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. **02-1818** as described below.
- ☐ Charge the amount of _____
- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.
- ☐ Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

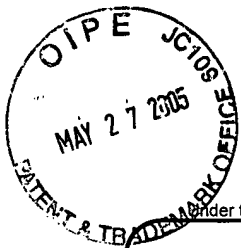
Dated: May 25, 2005

Signature

Robert M. Barrett (30,142)
Bell, Boyd & Lloyd LLC
P.O. Box 1135
Chicago, IL 60690-1135

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on May 25, 2005 (Date)	
Signature of Person Mailing Correspondence	
Heather Foster	
Typed or Printed Name of Person Mailing Correspondence	

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PTO/SB/82 (04-05)
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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/748,762
Filing Date	December 30, 2003
First Named Inventor	Mihai et al.
Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	EIS-5909C

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

29200

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

29200

OR

☐ Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Joseph P. Reagen

Date

May 2, 2005

Telephone

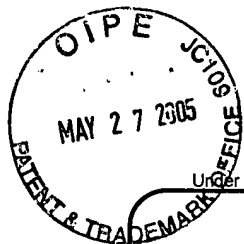
847-948-3315

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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Signature

Name

Joseph P. Reagan

Date

May 2, 2005

Telephone

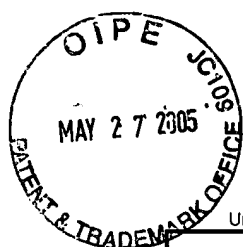
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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Mihai et al.Application No./Patent No.: 10/748,762 Filed/Issue Date: December 30, 2003Entitled: SYSTEM AND METHOD FOR MEDICAL DEVICE AUTHENTICATIONBaxter International Inc., a corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

A ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 014271, Frame 0153, or for which a copy thereof is attached.

OR

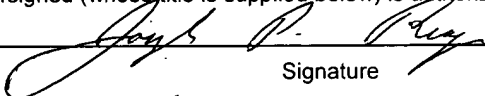
B ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
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The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.


Signature

Joseph P. Reagan

Printed or Typed Name

May 2, 2005

Date

847-948-3315

Telephone Number

Associate Chief Patent Counsel;

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Mihai et al.

Application No./Patent No.: 10/748,762 Filed/Issue Date: December 30, 2003

Entitled: SYSTEM AND METHOD FOR MEDICAL DEVICE AUTHENTICATION

Baxter International Inc., a corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

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1. ☒ the assignee of the entire right, title, and interest; or
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OR

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2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
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Joseph P. Reagen
Signature

Joseph P. Reagen

Printed or Typed Name

Associate Chief Patent Counsel

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